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PATENT

DOCKET: FIS9-1999-0317-US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

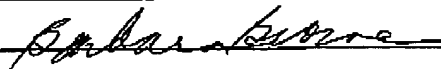
INVENTOR:	Harry J. Beatty)	EXAMINER:	Patel, A.
)		
SERIAL NO.:	09/597,523)	ART UNIT:	2127
)		
FILING DATE:	June 20, 2000)	DATE:	June 11, 2004
)		
FOR:	PARALLEL)		
	PROCESSING BY)		
	CREATING MEMORY)		
	HIERARCHAL LEVELS)		

AMENDMENT

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Commissioner of Patents
P.O. Box 1450
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I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Name: Barbara Browne Date: June 11, 2004

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Dear Sir:

Responsive to the Office Action mailed March 11, 2004, please amend the application as follows:

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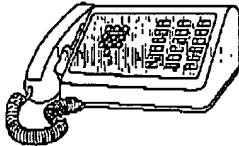
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PARAPROFESSIONALS

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FACSIMILE COVER LETTER

Our Ref.:	IBMF100273000	Your Ref.:	09/597,523
Fax No. Called:	703-872-9306		
Please Deliver To:	Ex. Ashok B. Patel U.S.P.T.O.	Art Unit Division	2127
From:	Peter W. Peterson		
Date:	June 11, 2004		

We are transmitting 20 pages (including this cover sheet)

MESSAGE:

AMENDMENT FOR FILING

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IBM Docket No. FIS1999-0317-US1

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Amendment Response/Transmittal

In re application of: Harry J. Beatty

Serial No. 09/597,523

Filed: June 20, 2000

For: **PARALLEL PROCESSING BY CREATING MEMORY HIERARCHAL LEVELS**
 Mail Stop _____
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Date: June 11, 2004

Transmitted herewith for filing is an **Amendment/Response** in the above-identified Application.

- ☐ No additional fee is required.
- ☒ The fee has been calculated as shown below:

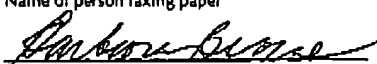
(Col. 1)		(Col. 2)	(Col. 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL 18*	MINUS	20**	= 0
INDEPENDENT (NO.) 10*	MINUS	5**	= 5
<input type="checkbox"/> 1ST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS			

Other Than Small Entity	
RATE	ADDITIONAL FEE
x \$ 18.00 =	\$
x \$ 86.00 =	\$ 430.00
\$290.00	\$
TOTAL	\$ 430.00


- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest No. Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge the Assignee IBM Corporation Deposit Account No. 09-0458 in the amount of \$ 430.00. A duplicate copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0458. A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. §1.16.
- ☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

<input checked="" type="checkbox"/> CERTIFICATION OF FACSIMILE TRANSMISSION	
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Barbara Browne	
Name of person faxing paper	
	June 11, 2004
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BY:


 Attorney: Peter W. Peterson
 Registration No. 31,867
 (203) 787-0595